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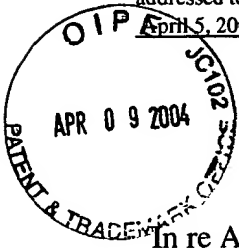
1646

Docket No.: PF-0589 USN

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: **Mail Stop Non-Fee Amendment**, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

April 5, 2004. By: [Signature] Printed: Annette Parker Jeanie G. Labra



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Au-Young et al.

Title: HUMAN MEMBRANE CHANNEL PROTEINS

Serial No.: 09/786,133

Filing Date:

June 11, 2001

Examiner: To Be Assigned

Group Art Unit:

1646

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

SUPPLEMENTAL AMENDMENT

Sir:

This communication is responsive to the Office communication mailed March 17, 2004 that was responsive to the amendment document filed March 5, 2004. Applicants request reconsideration of the above-referenced patent application in view of the following additional amendments and remarks to those presented in the Response mailed March 5, 2004.

Certificate of Mailing

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2004

By: [Signature]Printed: Annette ParkerJeanne G. Labra

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Au-Young et al.Title: HUMAN MEMBRANE CHANNEL PROTEINSSerial No.: 09/786,133Filing Date: June 11, 2001Examiner: To Be AssignedGroup Art Unit: 1646

Mail Stop: Non-Fee Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

TRANSMITTAL FEE SHEET

Sir:

Transmitted herewith are the following for the above-identified application:

1. Return Receipt Postcard; and
2. Supplement Amendment (8 pp.).

The fee has been calculated as follows:

Claims	Claims After Amendment	-	Claims Previously Paid For	=	Present Extra	Other Than Small Entity Rate	Fee	Additional Fee(s)
Total	20	-	20	=		x\$18.00		\$ 0
Indept.	2	-	3	=		x\$86.00		\$ 0
First Presentation of Multiple Dependent Claims:						+290.00		\$ 0
Total Fee:								\$ 0

☒ No additional Fee is required.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 and 1.17, or credit overpayment to Deposit Account No. 09-0108. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

INCYTE CORPORATION

[Signature]Date: 01 April 2004

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